| POSITION | INITIALS | ID NO. | DATE |
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| | F·F | | 04-25-01 |
| FEE DETERMINATION | | | |
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| FORMALITY REVIEW | M | 1019 | 06·14·01 |
| RESPONSE FORMALITY REVIEW | HA | 858 | 9/28/01 |

## INDEX OF CLAIMS

✔ .................................. Rejected
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— (Through numeral)... Canceled
÷ .................................. Restricted

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If more than 150 claims or 10 actions
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